

109TH CONGRESS  
1ST SESSION

# H. R. 3161

To amend title XVIII of the Social Security Act to provide for coverage under part B for medically necessary dental procedures.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 30, 2005

Mr. FERGUSON (for himself, Mr. HOYER, Mr. ANDREWS, Mr. SMITH of New Jersey, Mr. RANGEL, Mr. CARDIN, Mr. McNULTY, Mr. BOUCHER, Mrs. MILLER of Michigan, and Mr. STARK) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to provide for coverage under part B for medically necessary dental procedures.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; FINDINGS.**

4 (a) SHORT TITLE.—This Act may be cited as the  
5 “Medicare Medically Necessary Dental Care Act of 2005”.

6 (b) FINDINGS.—Congress finds the following:

1           (1) Oral and general healths are inseparable,  
2           and good dental care is critical to our overall phys-  
3           ical health and well-being.

4           (2) A 1999 Institute of Medicine study found  
5           that the prevention and management of oral infec-  
6           tion have significant health implications when such  
7           infection has the potential to increase morbidity in  
8           medicare patients who are at risk of adverse out-  
9           comes from underlying health problems.

10          (3) Improved oral health care may reduce mor-  
11          tality and morbidity rates of medicare patients suf-  
12          fering from head and neck cancer, leukemia,  
13          lymphoma, organ transplantation, and heart valve  
14          disease.

15          (4) The medicare program, from its inception,  
16          has excluded coverage for services in connection with  
17          the care, treatment, filling, removal, or replacement  
18          of teeth or structures directly supporting the teeth.

19          (5) The Centers for Medicare & Medicaid Serv-  
20          ices has approved coverage exceptions for limited  
21          dental services and proposed additional exceptions  
22          based on the argument that oral health services  
23          would reduce the risk of infection and other com-  
24          plications of medical care.

1           (6) The Institute of Medicine study concluded  
2           that it is reasonable for Congress to update the stat-  
3           utory language relating to coverage of dental serv-  
4           ices for medicare beneficiaries so that it clearly cov-  
5           ers dental care that is effective in preventing or re-  
6           ducing oral and systemic complications associated  
7           with serious medical conditions and treatments.

8   **SEC. 2. MEDICARE COVERAGE OF MEDICALLY NECESSARY**  
9                   **DENTAL PROCEDURES.**

10          (a) IN GENERAL.—Section 1862 of the Social Secu-  
11   rity Act (42 U.S.C. 1395y) is amended—

12               (1) in subsection (a)(12)—

13                   (A) by inserting “(A)” after “except that”,  
14                   and

15                   (B) by inserting before the semicolon at  
16                   the end the following: “, and (B) payment may  
17                   be made under part B for the provision of such  
18                   dental services that are medically necessary as  
19                   a direct result of, or will have a direct impact  
20                   on, an underlying medical condition if the cov-  
21                   erage of such services is medically necessary, as  
22                   determined under subsection (n)”; and

23               (2) by adding at the end the following new sub-  
24   section:

1       “(n) For purposes of subsection (a)(12)(B), dental  
2 services shall be considered to be medically necessary if  
3 furnished—

4           “(1) in conjunction with treatment of an indi-  
5 vidual with any of the following diagnoses: prosthetic  
6 heart valve replacement, cancer of the head or neck,  
7 lymphoma, leukemia, and organ transplantation; and

8           “(2) not later than one year after the later of—

9               “(A) the date of such diagnosis; or

10               “(B) the date of the related surgical or  
11 medical treatment for that diagnosis.”.

12       (b) EFFECTIVE DATE.—The amendments made by  
13 subsection (a) shall apply to procedures performed on or  
14 after January 1, 2006.

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